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7/26/02

IN THE UNITED STATES  
PATENT AND TRADEMARK OFFICE

Inventor(s) Donald F. Caldwell  
Kenneth Ward Church  
Glenn Stephen Fowler

Serial No. 09/383,889 Group Art Unit : 2177

Filing Date August 26, 1999

Docket No 113518 (113518A) Examiner: Greta Lee Robinson

Title DATA COMPRESSION METHOD AND APPARATUS

COMMISSIONER FOR PATENTS  
WASHINGTON, D.C. 20231

**NOTICE OF APPEAL FROM THE EXAMINER TO THE  
BOARD OF PATENT APPEALS AND INTERFERENCES**


SIR:

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the Examiner.

The fee for this Notice of Appeal is \$320, in accordance with 37 C.F.R. § 1.17(b). The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to AT&T Corp. Deposit Account No. 01-2745. I have enclosed a duplicate copy of this sheet.

The undersigned is an attorney of record.

Respectfully submitted,

By   
Benjamin S. Lee  
Registration No. 42,787  
Tel: 908-221-5438  
Fax: 732-368-6932

Date: July 19, 2002

AT&T CORP.  
P.O. Box 4110  
Middletown, NJ 07748

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BOARD OF PATENT APPEALS  
AND INTERFERENCES

# FEE TRANSMITTAL

Patent Fees are subject to annual revision.

Complete Known

TOTAL AMOUNT OF PAYMENT

\$320

Application Number	09/383889
Filing Date	08/26/1999
First Named Inventor	Donald F Caldwell et al.
Examiner Name	G. Robinson
Group/Art Unit	2177
Attorney Docket No.	113518A

**METHOD OF PAYMENT (check one)**

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 01-2745  
 Deposit Account Name: AT&T CORP.

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17  
 Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance

**FEE CALCULATION**

**1. FILING FEE**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
101	740	Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee	
106	330	Design Filing Fee	
108	740	Reissue Filing Fee	
114	160	Provisional Filing Fee	
<b>SUBTOTAL (1)</b>			<b>0</b>

**2. CLAIMS**

- Filing Under 37CFR 1.53 (b)  
 CPA Under 37CFR 1.53 (d)  
 Amendment

	Extra Claims	Fee from below	Fee Paid
Total	- 20 = 0	X 18 =	0
Ind.	- 3 = 0	X 84 =	0
Multiple Dependent Claims			0

Large Fee Code	Entity Fee(\$)	Fee Description	
103	18	Claims in excess of 20	
102	84	Independent Claims in excess of 3	
104	280	Multiple Dependent Claims	
109	84	** Reissue independent claims over original patent	
110	18	** Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2)</b>			<b>0</b>

\*\* or number previously paid, if greater; for Reissues, see above

**FEE CALCULATION (continued)**

**3. ADDITIONAL FEES**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	
127	50	Surcharge - late provisional filing fee or cover sheet	
139	130	Non-English specification	
147	2520	For filing a request for reexamination	
112*	920	Requesting publication of SIR prior to Examiner action	
113*	1840	Requesting publication of SIR after Examiner action	
115	110	Extension for reply within first month	
116	400	Extension for reply within second month	
117	920	Extension for reply within third month	
118	1440	Extension for reply within fourth month	
128	1960	Extension for reply within fifth month	
119	320	Notice of Appeal	320
120	320	Filing a brief in support of an appeal	
121	280	Request for oral hearing	
195	300	Publication fee	
140	110	Petition to revive - unavoidable	
141	1280	Petition to revive - unintentional	
142	1280	Utility issue fee (or reissue)	
143	460	Design issue fee	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	180	Submission of Information Disclosure Statement	
581	40	Recording each patent assignment per property (times number of properties)	
146	740	Filing a submission after final rejection (37 CFR 1.129(a))	
149	740	For each additional invention to be examined (37 CFR 1.129(b))	
179	710	Request for Continued Examination (RCE)	
169	900	Request for expedited exam of a design application	
Other fee (specify):			
<b>SUBTOTAL(3)</b>			<b>320</b>

BOARD OF PATENT APPEALS

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**SUBMITTED BY**

Typed or Printed Name: Benjamin S. Lee

Signature:

Date: July 19, 2002

Deposit Account User ID

Complete (if applicable)

Reg. Number: 42787

**TRANSMITTAL  
FORM***(to be used for all correspondence after initial filing)*

Application Number	09/383889
Filing Date	08/26/1999
First Named Inventor	Donald F Caldwell et al.
Group Art Unit	2177
Examiner Name	G. Robinson
Attorney Docket Number	113518A

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**Enclosures (check all that apply)**

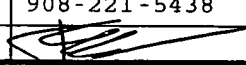
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Drawing(s) & Letter to Official Draftsman <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to the Commissioner <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Appeal Communications to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> CD, Number of CDs <input type="checkbox"/> Additional enclosure(s) (please identify below)
Remarks		

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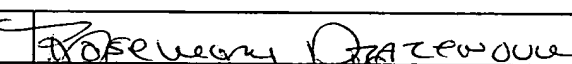
**CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	Customer Number - 26652	or <input type="checkbox"/> Correspondence address below	
<b>NAME</b>	Samuel H. Dworetzky		
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<b>COUNTRY</b>	United States of America	<b>ZIP CODE</b>	07748-4110
		<b>FAX</b>	732-368-6932

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

<b>NAME</b>	Benjamin S. Lee	<b>Reg. #</b>	42787
<b>TELEPHONE</b>	908-221-5438		
<b>SIGNATURE</b>		<b>DATE</b>	July 19, 2002

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: July 19, 2002	
Type or Printed Name	
Signature	Date July 19, 2002

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